Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

# Filing at a Glance

Company: Allstate Indemnity Company

Product Name: Personal Umbrella SERFF Tr Num: ALSX-125395027 State: Arkansas

TOI: 17.0 Other Liability - Claims SERFF Status: Closed State Tr Num: EFT \$25

Made/Occurrence

Sub-TOI: 17.0021 Personal Umbrella and Co Tr Num: R18891 State Status: Fees verified and

Excess received

Filing Type: Rule Co Status: Reviewer(s): Alexa Grissom, Betty

Montesi, Brittany Yielding

Author: SPI AllState Disposition Date: 03/04/2008

Date Submitted: 12/20/2007 Disposition Status: Filed

Effective Date Requested (New): 03/10/2008 Effective Date (New): 03/10/2008

05/12/2008

State Filing Description:

#### **General Information**

Project Name: 2007 - DeHoyos Appeals Process Filing Status of Filing in Domicile: Authorized

Project Number: R18891 Domicile Status Comments:

Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:

Filing Status Changed: 03/04/2008 State Status Changed: 01/29/2008

State Status Changed: 01/29/2008 Deemer Date: Corresponding Filing Tracking Number:

Filing Description:

**Insurance Scoring Appeals Process** 

With this filing, Allstate Indemnity Company is implementing an appeals process for Insurance Scoring in the state of Arkansas. The same process will be implemented in all Allstate Group companies and lines that order credit reports for the use of Insurance Scoring in Arkansas. The appeals process will allow consumers whose Insurance Score has been

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

adversely impacted by extraordinary circumstances to appeal the Insurance Score, Allstate has previously assigned to them. If an insured meets the criteria listed in the rule, a neutral Insurance Score will be applied to the policy. The conditions under, which an insured may appeal his or her Insurance Score may be found in the attached Rule Pages.

This change will not affect the way Allstate initially assigns an Insurance Score to an insured. There is no rate change associated with this filing.

Effective Date:

New business: March 10, 2008 Renewals: March 10, 2008

# **Company and Contact**

#### **Filing Contact Information**

Patrick Torsney, ptors@allstate.com
2775 Sanders Road (847) 402-5000 [Phone]
Northbrook, IL 60062 (847) 402-9757[FAX]

**Filing Company Information** 

Allstate Indemnity Company CoCode: 19240 State of Domicile: Illinois

2775 Sanders Road Group Code: 8 Company Type:

Suite A5

Northbrook, IL 60062 Group Name: Allstate State ID Number:

(847) 402-5000 ext. [Phone] FEIN Number: 36-6115679

-----

# Filing Fees

Fee Required? Yes
Fee Amount: \$25.00
Retaliatory? No

Fee Explanation: Independent Rule Filings - All P&C Lines = \$25

Per Company: No

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Allstate Indemnity Company \$25.00 12/20/2007 17194542

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

**Created On** 

**Date Submitted** 

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

# **Correspondence Summary**

**Created By** 

Alexa Grissom 01/24/2008

### **Dispositions**

**Status** 

Pending

Industry
Response
Filing Notes

|                       | sponse Lette                                   | ers            | 03/04/2008   | 03/04/2008  |   |
|-----------------------|--|----------------|--|---|---|
| Letters<br>Created By | Created On                                     | Date Submitted | Response Letter<br>Responded By  | s<br>Created On   | Date Submitted  |
| Alexa Grissom         | 02/15/2008                                     | 02/15/2008     | SPI AllState   | 02/28/2008  | 02/28/2008  |
| Alexa Grissom         | 01/24/2008                                     | 01/24/2008     | SPI AllState   | 02/07/2008  | 02/07/2008  |
| Alexa Grissom         | 01/03/2008                                     | 01/03/2008     | SPI AllState   | 01/16/2008  | 01/16/2008  |
|                       | Letters Created By Alexa Grissom Alexa Grissom | Letters        | Created By Created On Date Submitted  Alexa Grissom 02/15/2008 02/15/2008  Alexa Grissom 01/24/2008 01/24/2008 | Letters Created By Created On Date Submitted Responded By  Alexa Grissom 02/15/2008 02/15/2008 SPI AllState  Alexa Grissom 01/24/2008 01/24/2008 SPI AllState | Letters Created By Created On Date Submitted Responded By Created On Alexa Grissom 02/15/2008 02/15/2008 SPI AllState 02/28/2008  Alexa Grissom 01/24/2008 01/24/2008 SPI AllState 02/07/2008 |

Subject Note Type Created By Created Date Submitted
On

New effective dates. Note To Reviewer SPI AllState 04/29/2008 04/29/2008

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

# **Disposition**

Disposition Date: 03/04/2008 Effective Date (New): 03/10/2008 Effective Date (Renewal): 05/12/2008

- Effective Date (Renewal) changed from NULL to 05/12/2008 by Grissom, Alexa on 05/05/2008.

Status: Filed Comment:

Rate data does NOT apply to filing.

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

| Item Type           | Item Name   | Item Status | <b>Public Access</b> |
|---------------------|---|-------------|----------------------|
| Supporting Document | NAIC Loss Cost Filing Document for OTHER than Workers' Comp | Filed       | Yes                  |
| Supporting Document | NAIC loss cost data entry document                          | Filed       | Yes                  |
| Supporting Document | Uniform Transmittal Document-Proper Casualty                | ty &Filed   | Yes                  |
| Supporting Document | Response to DOI Objection                                   | Filed       | Yes                  |
| Supporting Document | objection resp 2  | Filed       | Yes                  |
| Supporting Document | DOI Obj #3  | Filed       | Yes                  |
| Rate                | CheckingList_R18891   | Filed       | Yes                  |
| Rate                | Manual_R18891   | Filed       | Yes                  |

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

### **Objection Letter**

Objection Letter Status Pending Industry Response

Objection Letter Date 02/15/2008 Submitted Date 02/15/2008

Respond By Date
Dear Patrick Torsney,

This will acknowledge receipt of the captioned filing. Per our Director, please delete the language stating the effective date is 03-01-08. The correct date is on or after January 1, 2004, and is not at the discretion of Allstate. The subsequent reassignment must be to the "neutral" tier from the credit perspective.

Please feel free to contact me if you have questions.

Sincerely,

Alexa Grissom

# **Response Letter**

Response Letter Status Submitted to State

Response Letter Date 02/28/2008 Submitted Date 02/28/2008

Dear Alexa Grissom,

#### Comments:

Response to 2/15/8 objection.

#### Response 1

Comments: Please see attached document re: 2/15/8 objection.

#### **Changed Items:**

#### **Supporting Document Schedule Item Changes**

Satisfied -Name: DOI Obj #3

Comment:

No Form Schedule items changed.

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

No Rate/Rule Schedule items changed.

Please contact Patrick Torsney at 847 402 7309 or at ptors@allstate.com if you have any questions.

Sincerely,

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

### **Objection Letter**

Objection Letter Status Pending Industry Response

Objection Letter Date 01/24/2008 Submitted Date 01/24/2008

Respond By Date
Dear Patrick Torsney,

This will acknowledge receipt of the captioned filing. Please advise how Allstate would assist someone in Groups 3 and higher.

Please feel free to contact me if you have questions.

Sincerely,

Alexa Grissom

# **Response Letter**

Response Letter Status Submitted to State

Response Letter Date 02/07/2008 Submitted Date 02/07/2008

Dear Alexa Grissom,

### Comments:

Response to 1/24/8 objection.

# Response 1

Comments: Please see attached documents re: 1/24/8 objection.

### **Changed Items:**

#### **Supporting Document Schedule Item Changes**

Satisfied -Name: objection resp 2

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

Please contact Patrick Torsney at 847 402 7309 or at ptors@allstate.com if you have any questions.

Sincerely,

SPI AllState

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

### **Objection Letter**

Objection Letter Status Pending Industry Response

Objection Letter Date 01/03/2008 Submitted Date 01/03/2008

Respond By Date
Dear Patrick Torsney,

This will acknowledge receipt of the captioned filing. Please provide more information regarding this proposed rule.

Does an insured have to be in Group 1 for it to apply?

Please feel free to contact me if you have questions.

Sincerely,

Alexa Grissom

# **Response Letter**

Response Letter Status Submitted to State

Response Letter Date 01/16/2008 Submitted Date 01/16/2008

Dear Alexa Grissom,

#### **Comments:**

Response to 1/3/8 objection.

# Response 1

Comments: Please see attached document re: 1/3/8 objection.

### **Changed Items:**

#### **Supporting Document Schedule Item Changes**

Satisfied -Name: Response to DOI Objection

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

Please contact me at 847 402 7309 or at ptors@allstate.com if you have any questions. Thank you Patrick Torsney

Sincerely,

SPI AllState

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

# **Objection Letter**

Objection Letter Status Pending Industry Response

Objection Letter Date 01/24/2008

Submitted Date

Respond By Date

Dear Patrick Torsney,

This will acknowledge receipt of the captioned filing. It appears that Group 2 is the second highest rated tier. Is this correct?

Please feel free to contact me if you have questions.

Sincerely,

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

#### **Note To Reviewer**

### Created By:

SPI AllState on 04/29/2008 02:17 PM

### Subject:

New effective dates.

#### Comments:

The new effective dates for this filing for new business & renewals will be 5/12/8

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

# **Rate Information**

Rate data does NOT apply to filing.

SERFF Tracking Number: ALSX-125395027 State: Arkansas Filing Company: State Tracking Number: EFT \$25 Allstate Indemnity Company

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

### Rate/Rule Schedule

**Review Status: Exhibit Name:** Rule # or Page Rate Action **Previous State Filing Attachments** #:

Number:

Filed CheckingList\_R18891 R18891 R18891.PDF New

Filed Manual\_R18891 Replacement R18891.PDF R18891

### **CHECKING LIST FOR PERSONAL UMBRELLA POLICY**

Printing dates are shown on each page to facilitate identification of different editions, but have no direct connection with the effective date of the page.

# **RULES**

Enclosed: Pages 5-1 and 5-2 dated 1-1-2008

Withdrawn: Pages 5-1 and 5-2 dated 9-02-2005

Filing Number: **R18891**Allstate Indemnity Company

#### **RULE 5 – INSURANCE SCORE**

#### A. INITIAL INSURANCE SCORE DETERMINATION

At policy inception, an Insurance Score Group will be assigned to the policy based on the Insurance Score assigned when the credit report(s) ordered in connection with the policy were requested. The point values for the Insurance Score Groups are as follows:

For Insurance Score Group assignment on or after 2/20/06:

| Insurance Score<br>Group | Insurance Score | Points |
|--------------------------|-----------------|--------|
| 1                        | 0 – 395         | 0      |
| 2                        | 396 – 417       | 7      |
| 3                        | 418 – 446       | 21     |
| 4                        | 447 – 490       | 33     |
| 5                        | 491 – 999       | 49     |

The Insurance Score Group will be assigned at the time of the last credit report ordering, regardless of the effective date of the policy.

With respect to credit reports requested on and after 2/20/06 where a credit report cannot be obtained, or where a credit report consists only of inquiries, an Insurance Score will be assigned based on the age of the individual at the time of the credit report request as follows:

| Age                    | Insurance Score |
|------------------------|-----------------|
| Less than 19 years old | 455             |
| 19 – 64 years old      | 505             |
| 65 years old or older  | 430             |

The policy of any insured whose credit report was ordered by Allstate Indemnity Company for the purpose of tier determination pursuant to this rule on or after 3/10/2008 may, at Allstate's sole discretion, be assigned to Insurance Score Group 2 retroactive to the most recent effective date of the policy, if such insured provides proof acceptable to Allstate that his or her credit information has been negatively impacted by any of the following extraordinary circumstances: divorce; death of a spouse or member of the same household; involuntary unemployment; catastrophic medical expense; care of adult dependent; identity theft; long-term injury, illness or disability; care of a dependent grandchild; or domestic violence.

#### **B. SUBSEQUENT INSURANCE SCORE DETERMINATION**

At each renewal, the same Insurance Score will continue to apply unless the following applies:

1. Prior to every renewal effective date following the effective date of the policy for which

credit report(s) were most recently ordered to determine the applicable Insurance Score and only at the named insured's annual request, a new credit report(s) will be obtained for all applicable insureds on the policy at the time of reorder. The reorder will be done according to the procedure regarding ordering of credit reports that is in effect for Allstate Indemnity Company at the time of reorder. If an insured requests a reorder, the next automatic reorder will take place prior to the renewal effective date following the effective date of the policy for which the credit report(s) was most recently ordered to determine the applicable Insurance Score.

NOTE: If named insured requests a credit report reorder(s) less than 45 days prior to the renewal effective date of the policy, the updated Insurance Score will be reflected in the Insurance Score Group for the next following policy period.

2. For policies written before 2/20/06, prior to the first renewal effective date on or after 4/06/06, a new credit report(s) will be obtained for all applicable insureds on the policy at the time of renewal, according to the procedure regarding ordering of credit reports that is in effect for Allstate Indemnity Company at the time of the reorder, and the applicable Insurance Score Group will be assigned as determined in Section A as of such renewal date.

The policy of any insured whose credit report was ordered by Allstate Indemnity Company for the purpose of tier determination pursuant to this rule on or after 3/10/2008 may, at Allstate's sole discretion, be assigned to Insurance Score Group 2 retroactive to the most recent effective date of the policy, if such insured provides proof acceptable to Allstate that his or her credit information has been negatively impacted by any of the following extraordinary circumstances: divorce; death of a spouse or member of the same household; involuntary unemployment; catastrophic medical expense; care of adult dependent; identity theft; long-term injury, illness or disability; care of a dependent grandchild; or domestic violence.

### C. CREDIT REPORT REORDERS

In the event it is necessary to reorder any credit report(s) other than for reasons listed in Section B above, all credit reports needed to assign the policy to an Insurance Score Group will be reordered. New credit report(s) will be obtained for all applicable insureds on the policy at the time of the reorder, according to the procedure regarding ordering of credit reports that is in effect for Allstate Indemnity Company at the time of the reorder, and the applicable Insurance Score Group will be assigned as determined in Section A.

ALSX-125395027 SERFF Tracking Number: State: Arkansas Filing Company: Allstate Indemnity Company State Tracking Number: EFT \$25

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

**Review Status:** 

03/04/2008

03/04/2008

03/04/2008

03/04/2008

Filed

Filed

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

# **Supporting Document Schedules**

Bypassed -Name: NAIC Loss Cost Filing Document

for OTHER than Workers' Comp

**Bypass Reason:** N/A - Loss costs are not relevant to this filing.

**Comments:** 

**Review Status:** 

N/A - Loss costs are not relevant to this filing. **Bypass Reason:** 

Comments:

Bypassed -Name:

**Review Status:** Filed

NAIC loss cost data entry document

Satisfied -Name: Uniform Transmittal Document-

**Property & Casualty** 

Comments:

Attachment:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF

**Review Status:** Response to DOI Objection Filed

Comments: Attachment:

Satisfied -Name:

Response to DOI Objection.PDF

**Review Status:** 

objection resp 2 Filed Satisfied -Name: 03/04/2008

Comments:

Attachment:

objection resp 2.PDF

**Review Status:** 

DOI Obj #3 Filed Satisfied -Name: 03/04/2008

Company Tracking Number: R18891

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess

Product Name: Personal Umbrella

Project Name/Number: 2007 - DeHoyos Appeals Process Filing/R18891

Comments:

**Attachment:** 

DOI Obj #3.PDF

# **Property & Casualty Transmittal Document**

| 1.   | Reserved for Insurance De   |   |  |                                 |  |                |                                  |
|--|---|---|--|---------------------------------|--|----------------|----------------------------------|
|  | Use Only  |   | ne filing is received:   |                                 |  |                |                                  |
|  | b. Analyst  |   |  |                                 |  |                |                                  |
|  |   | sition:   |  |                                 |  |                |                                  |
|  |   | f disposition of the filing:  |  |                                 |  |                |                                  |
|  |   |   | e date of filing:  | ū                               |  |                |                                  |
|  |   |   | New Business   |                                 |  |                |                                  |
|  |   |   | Renewal Business   |                                 |  |                |                                  |
|  |   | f. State Fi   |  |                                 |  |                |                                  |
|  |   | g. SERFF  |  |                                 |  |                |                                  |
|  |   | h. Subject  | Codes  |                                 |  |                |                                  |
| 3.   | Group Nama  |   |  |                                 |  |                | Group NAIC #                     |
| ა.   | Group Name Allstate   |   |  |                                 |  |                | Group NAIC #<br>008              |
|  |   |   | D  | NAIO #                          | LEEINI "                                   |                |                                  |
| 4.   | Company Name(s)   |   | Domicile   | NAIC #                          | FEIN#                                      |                | State #                          |
|  | Allstate Indemnity Company  |   | IL   | 19240                           | 36-611                                     | 5679           |                                  |
|  |   |   |  |                                 |  |                |                                  |
|  |   |   |  |                                 |  |                |                                  |
|  |   |   |  |                                 |  |                |                                  |
|  |   |   |  |                                 |  |                |                                  |
|  |   |   |  |                                 |  |                |                                  |
|  |   |   |  |                                 |  |                |                                  |
| 5.   | Company Tracking Number   | R1889   | 11   |                                 |  |                |                                  |
| Ŭ.   |   | 111000  | ′ !  |                                 |  |                |                                  |
|  | Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]   |   |  |                                 |  |                |                                  |
|  |   |   |  |                                 |  |                |                                  |
| Conta<br>6.  | ct Info of Filer(s) or Corporate Name and address   | e Officer(s) [includ  | e toll-free number] Telephone #s   | FAX                             | #  |                | e-mail                           |
|  |   |   |  | FAX                             | #  |                | e-mail                           |
|  |   |   |  | <b>FAX</b><br>847-402           |  | ptors          | e-mail<br>s@allstate.com         |
|  | Name and address  |   | Telephone #s   |                                 |  | ptors          |                                  |
|  | Patrick Torsney 2775 Sanders Road, Suite A5   |   | <b>Telephone #s</b><br>800-366-2958  |                                 |  | ptors          |                                  |
|  | Name and address  Patrick Torsney 2775 Sanders Road, Suite  |   | <b>Telephone #s</b><br>800-366-2958  |                                 |  | ptors          |                                  |
|  | Patrick Torsney 2775 Sanders Road, Suite A5   |   | <b>Telephone #s</b><br>800-366-2958  |                                 |  | ptors          |                                  |
|  | Patrick Torsney 2775 Sanders Road, Suite A5   |   | <b>Telephone #s</b><br>800-366-2958  |                                 |  | ptors          |                                  |
|  | Patrick Torsney 2775 Sanders Road, Suite A5   | Title   | <b>Telephone #s</b><br>800-366-2958  |                                 |  | ptors          |                                  |
| 6.   | Patrick Torsney 2775 Sanders Road, Suite A5 Northbrook IL 60062   | Title   | <b>Telephone #s</b><br>800-366-2958  |                                 |  | ptors          |                                  |
| 7.<br>8.   | Patrick Torsney 2775 Sanders Road, Suite A5 Northbrook IL 60062  Signature of authorized filer Please print name of author  | Title<br>rized filer  | Relephone #s  800-366-2958 Ext. 27309  Patrick Torsney   | 847-402                         |  | ptors          |                                  |
| 7.<br>8.   | Patrick Torsney 2775 Sanders Road, Suite A5 Northbrook IL 60062  Signature of authorized filer  | Title<br>rized filer  | Relephone #s  800-366-2958 Ext. 27309  Patrick Torsney   | 847-402                         | -9757                                      |                | s@allstate.com                   |
| 7.<br>8.<br>Filing<br>9.                             | Patrick Torsney 2775 Sanders Road, Suite A5 Northbrook IL 60062  Signature of authorized filer Please print name of author Information (see General Instr Type of Insurance (TOI) Sub-Type of Insurance (Sub-   | Title  rized filer  uctions for descript  -TOI)                                     | Telephone #s  800-366-2958 Ext. 27309  Patrick Torsney ions of these fields)   | 847-402                         | -9757<br>Made/Occ                          | currence       | s@allstate.com                   |
| 7.<br>8.<br>Filing                                   | Patrick Torsney 2775 Sanders Road, Suite A5 Northbrook IL 60062  Signature of authorized filer Please print name of author Information (see General Instr Type of Insurance (TOI) Sub-Type of Insurance (Sub-State Specific Product code  | Title  rized filer  uctions for descript  -TOI) (s) (if                             | Patrick Torsney ions of these fields) 17.0021 Personal   | 847-402                         | -9757<br>Made/Occ                          | currence       | s@allstate.com                   |
| 7.<br>8.<br>Filing<br>9.<br>10.                      | Patrick Torsney 2775 Sanders Road, Suite A5 Northbrook IL 60062  Signature of authorized filer Please print name of author Information (see General Instr Type of Insurance (TOI) Sub-Type of Insurance (Sub-State Specific Product code applicable) [See State Specific  | Title  rized filer  uctions for descript  -TOI) (s) (if Requirements]               | Patrick Torsney ions of these fields) 17.0 Other Liability 17.0021 Personal  | 847-402                         | -9757<br>Made/Occ                          | currence       | s@allstate.com                   |
| 7.<br>8.<br>Filing<br>9.<br>10.<br>11.               | Patrick Torsney 2775 Sanders Road, Suite A5 Northbrook IL 60062  Signature of authorized filer Please print name of author Information (see General Instr Type of Insurance (TOI) Sub-Type of Insurance (Sub- State Specific Product code applicable) [See State Specific Company Program Title (Mar  | Title  rized filer  uctions for descript  -TOI) (s) (if Requirements]               | Patrick Torsney ions of these fields) 17.0 Other Liability 17.0021 Personal N/A Personal Umbrella  | 847-402                         | -9757<br>Made/Ocond Exces                  | currence       | s@allstate.com                   |
| 7.<br>8.<br>Filing<br>9.<br>10.                      | Patrick Torsney 2775 Sanders Road, Suite A5 Northbrook IL 60062  Signature of authorized filer Please print name of author Information (see General Instr Type of Insurance (TOI) Sub-Type of Insurance (Sub-State Specific Product code applicable) [See State Specific  | Title  rized filer  uctions for descript  -TOI) (s) (if Requirements]               | Patrick Torsney ions of these fields) 17.0 Other Liability 17.0021 Personal N/A Personal Umbrella Rate/Loss Cost   | 847-402  7 - Claims Numbrella a | -9757  Made/Occ nd Exces                   | currence       | s@allstate.com                   |
| 7.<br>8.<br>Filing<br>9.<br>10.<br>11.               | Patrick Torsney 2775 Sanders Road, Suite A5 Northbrook IL 60062  Signature of authorized filer Please print name of author Information (see General Instr Type of Insurance (TOI) Sub-Type of Insurance (Sub- State Specific Product code applicable) [See State Specific Company Program Title (Mar  | Title  rized filer  uctions for descript  -TOI) (s) (if Requirements]               | Patrick Torsney ions of these fields) 17.0 Other Liability 17.0021 Personal  N/A Personal Umbrella  Rate/Loss Cost Forms   | 847-402                         | -9757  Made/Occ nd Exces  Rules  Combinati | currence<br>ss | Rates/Rules                      |
| 7.<br>8.<br>Filing<br>9.<br>10.<br>11.               | Patrick Torsney 2775 Sanders Road, Suite A5 Northbrook IL 60062  Signature of authorized filer Please print name of author Information (see General Instr Type of Insurance (TOI) Sub-Type of Insurance (Sub- State Specific Product code applicable) [See State Specific Company Program Title (Mar  | Title  rized filer  uctions for descript  -TOI) (s) (if Requirements]               | Patrick Torsney ions of these fields) 17.0 Other Liability 17.0021 Personal N/A Personal Umbrella Rate/Loss Cost   | 847-402                         | -9757  Made/Occ nd Exces                   | currence<br>ss | Rates/Rules                      |
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### **Property & Casualty Transmittal Document**

| 20. | This filing transmittal is part of Company Tracking # | R18891 |
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21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

Insurance Scoring Appeals Process

With this filing, Allstate Indemnity Company is implementing an appeals process for Insurance Scoring in the state of Arkansas. The same process will be implemented in all Allstate Group companies and lines that order credit reports for the use of Insurance Scoring in Arkansas. The appeals process will allow consumers whose Insurance Score has been adversely impacted by extraordinary circumstances to appeal the Insurance Score, Allstate has previously assigned to them. If an insured meets the criteria listed in the rule, a neutral Insurance Score will be applied to the policy. The conditions under, which an insured may appeal his or her Insurance Score may be found in the attached Rule Pages.

This change will not affect the way Allstate initially assigns an Insurance Score to an insured. There is no rate change associated with this filing.

Effective Date:

New business: March 10, 2008 Renewals: March 10, 2008

**22. Filing Fees** (Filer must provide check # and fee amount if applicable.)

[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: N/A - Paid via EFT.

**Amount:** \$25.00

Independent Rule Filings - All P&C Lines = \$25

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

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<sup>\*\*\*</sup>Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

### ALLSTATE INDEMNITY COMPANY PERSONAL UMBRELLA POLICY ARKANSAS

Response to letter dated January 3, 2008 regarding Filing #R18891

1. Please provide more information regarding this proposed rule. Does an insured have to be in Group 1 for it to apply?

If an insured feels that his or her credit information has been negatively impacted by the extraordinary circumstances listed in Rule 5 of the Allstate Indemnity Company (AI) Personal Umbrella Policy Manual, he or she may choose to appeal the Insurance Score that Allstate has previously assigned to him or her. The appeals process mentioned in the memo refers to the process an insured would use to provide proof that his or her credit information has been negatively impacted by the listed extraordinary circumstances. Provided the insured's appeal meets the criteria detailed in the rule, at Allstate's sole discretion, the insured will be assigned to Insurance Score (IS) Group 2 retroactive to the most recent effective date of the policy. Any insured who feels that his or her credit information has been negatively impacted by the extraordinary circumstances listed in Rule 5 may choose to appeal the Insurance Score previously assigned to them; this applies to all insureds, regardless of initial IS Group assignment.

### ALLSTATE INDEMNITY COMPANY PERSONAL UMBRELLA POLICY ARKANSAS

Response to letter dated January 25, 2008 regarding Filing #R18891

### 1. Please advise how Allstate would assist someone in Groups 3 and higher.

An insured may choose to appeal the Insurance Score that Allstate has assigned to him or her if the insured feels that his or her credit information has been negatively impacted by the extraordinary circumstances listed in Rule 5 of the Allstate Indemnity Company (AI) Personal Umbrella Policy Manual. This applies most specifically to insureds in IS Groups 3, 4, and 5. Provided the insured's appeal meets the criteria detailed in the rule, at Allstate's sole discretion, the insured will be assigned to the neutral insurance score group, IS Group 2, retroactive to the most recent effective date of the policy. Please note that IS Group 1 is the lowest rated and IS Group 5 is the highest rated IS Group.

Studies conducted on the use of credit information consistently show that credit report information is very predictive of insurance loss potential. However, under very extraordinary circumstances, it may be possible that the underlying credit report information is not representative of a person's insurance loss potential, even though it is predictive for the vast majority of risks. Using a neutral score when an extraordinary circumstance has been substantiated essentially puts the insured in the same position as if credit information were not used at all. This is consistent with the proposition that the underlying information is not useful in providing predictive information regarding insurance loss potential.

It is not possible to re-construct what a person's credit report would have looked like had an extraordinary circumstance not occurred. This would involve speculation regarding what a person "would have done differently" had the event not occurred. While it is possible to develop hypothetical comparisons with and without extraordinary circumstances having occurred, it is not really possible to identify who would fall into these categories. Thus we feel that placing an insured in the neutral insurance score group is the most equitable solution to dealing with those affected by extraordinary circumstance. While insureds whose credit report information would place them in a better than neutral group may also have been impacted by extraordinary circumstances, we consider them ineligible to make an appeal. In these cases, it is to the customer's benefit to have us consider their existing credit information rather than to ignore the entire credit report and place then in a neutral insurance score group, resulting in a higher rate.

### ALLSTATE INDEMNITY COMPANY PERSONAL UMBRELLA POLICY ARKANSAS

Response to letter dated February 19, 2008 regarding Filing #R18891

1. Per our director, please delete the language stating the effective date is 03-01-08. The correct date is on or after January 1, 2004, and is not at the discretion of Allstate. The subsequent reassignment must be to the "neutral" tier from the credit perspective.

Allstate is aware of the requirements of Ark. Code Ann. 23-67-405 to 415, and believe our current procedures comply with the requirement. This law requires that we have a process to rerate any customer whose credit information is corrected as a result of the dispute resolution process at the Credit Reporting Agency. We have such a process in place and this process did begin prior to January 1, 2004 when this law became effective. We are now proposing an additional process where a customer may appeal their assignment based upon extraordinary circumstances which have affected their credit report. This process works in addition to, not in place of our current correction process, and allow for customers to make an appeal even though the information present on their credit report is actually correct. Because this is a new process in Arkansas, and goes beyond the requirements of Ark. Code Ann. 23-67-405 to 415, we plan to implement this process on a prospective basis and thus we have proposed an effective date of 3/10/08.

For those who provide sufficient information to demonstrate their extraordinary circumstance, the subsequent reassignment will be to the neutral tier from a credit perspective. Due to the nature of this process, Allstate must be in the position of reviewing and determining the documentation provided by the customer to support their case for an appeal.